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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number 053893-5006-02	
<input type="checkbox"/> Declaration Submitted with Initial Filing		First Named Inventor Haig H. Kazazian, Jr.	
<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge required) (37 CFR 1.16(e))		COMPLETE IF KNOWN	
		Application Number 09/653,812	
		Filing Date September 1, 2000	
		Group Art Unit 1632	
		Examiner Name Anne Marie Falk, Ph.D.	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPOSITIONS AND METHODS OF USE OF MAMMALIAN RETROTRANSPOSONS

the specification of which

is attached hereto

OR

was filed on September 1, 2000 as United States Application Number 09/653,812 or PCT International Application Number * and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designed at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/006,831	11/16/1995

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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I hereby claim the benefit under 35 U.S.C. 120 of any United States non-provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional non-provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
08/749,805 08/847,844	11/15/1996 04/28/1997	

DECLARATION – Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or <input type="checkbox"/> Correspondence address below			
Name Kathryn Doyle, Ph.D., J.D.			
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POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Kathryn Doyle, Ph.D., J.D., Reg. No. 36,317

- [X] I hereby appoint the practitioner(s) associated with Customer Number 23973 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.
- [] Attached, as part of this Declaration and Power of Attorney, is the authorization of the above-named practitioner(s) to accept and follow instructions from my representative(s).

DECLARATION

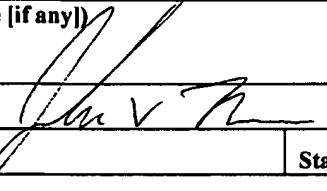
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) HAIG H.		Family Name or Surname KAZAZIAN, Jr.	
Inventor's Signature		Date	
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NAME OF SECOND INVENTOR		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) JEF D.		Family Name or Surname BOEKE	
Inventor's Signature		Date	
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Mailing Address:			
City: Baltimore	State MD	Zip 21210	Country US
NAME OF THIRD INVENTOR		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) JOHN V.		Family Name or Surname MORAN	
Inventor's Signature 		Date 3/14/05	
Residence/City: Ann Arbor	State MI	Country US	Citizenship US
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Mailing Address:			
City: Ann Arbor	State MI	Zip 48105	Country US
NAME OF FOURTH INVENTOR		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) BETH A.		Family Name or Surname DOMBROSKI	
Inventor's Signature		Date	
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